

ALABAMA HOME BUILDERS FOUNDATION

In Cooperation with the

Alabama Board of Heating, Air Conditioning & Refrigeration Contractors



HVAC-R CLASSROOM TRAINING TOOLS GRANT APPLICATION

School Name:			
Campus:			
Mailing Address:			
City:	State:	Zip:	
Physical Address:			
City:	State:	Zip:	
HVAC Department Head:	Department Head Phone:		
Department Head Email:			
Current Number of Students Enro	olled in Program:		
Number of Students Graduating f	rom Program this Year:		
Number of Students Enrolled in P	rogram for the Previous Ye	ar:	
Please give a brief synopsis of the	program's needs, what too	ols or supplies that there is a shortage	e of at your facility,
and how your program would im	prove if this grant is award	ed to your program.	
D			
Department Head Signature	Witness	Date	
Grant request should be received	no later than July 21 for th	e school year in which the grant will l	be used.
Please Return Application to:	State of Alabama Boar Air Conditioning & Re	rd of Heating, frigeration Contractors	

P. O. Box 305025

Montgomery, AL 36130-5025

Applications May also be Emailed to: jeffrey.becraft@hacr.alabama.gov